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Date of Deposit: February 9, 2001

Attorney Docket No. 07473-033

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Lawrence M. Sherman

For: SYSTEM AND METHOD FOR SIMULTANEOUS
MULTIPLE DEATH LIFE INSURANCE

February 9, 2001
Boston, Massachusetts

Box PATENT APPLICATION
Assistant Commissioner for Patents
Washington, D.C. 20231

TRANSMITTAL LETTER

Sir:

Transmitted herewith for filing in the present application are the following documents:

- [X] Request for Filing New Patent Application under 37 C.F.R. 1.53(b);
- [X] Patent Application including Specification 16 pages); Claims (1 page); and
Abstract (1 page);
- [X] Two (2) Sheets of Informal Drawings - Figs. 1-2;
- [X] Declaration and Power of Attorney (unsigned); and
- [X] Check in the amount of \$710.00 for Patent Application Filing Fee.

If the enclosed papers are considered incomplete, the Mail Room and/or the Application Branch is respectfully requested to contact the undersigned at 617/542-6000, Boston, Massachusetts.

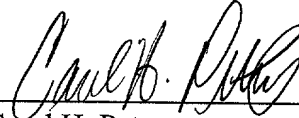


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Applicant: Lawrence M. Sherman

If the amount of the check is insufficient, the Commissioner is hereby authorized to charge any additional fees to the undersigned's deposit account no. 50-0311. Please reference Attorney Docket No. 07473-033.

Respectfully submitted,



Carol H. Peters

Registration No. 45,010

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Attorneys for Applicant

Date: February 9, 2001

Attorney Docket No.: 07473-033

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PATENT APPLICATION
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NEW NONPROVISIONAL APPLICATION
PURSUANT TO 37 C.F.R. 1.53(b)

This application claims priority under 35 U.S.C. §119(e) to United States provisional patent application serial No. 60/181,649, filed on February 10, 2000, incorporated herein by reference.

1. This is a request for filing a new nonprovisional application under 37 C.F.R. 1.53(b) entitled

**SYSTEM AND METHOD FOR SIMULTANEOUS
MULTIPLE DEATH LIFE INSURANCE**

2. ☒ Specification (16 pages); Claims (1 page); Abstract (1 page)
3. ☒ Drawings - Number of Sheets Two (2) (Figs. 1-2)
☐ Formal
☒ Informal
4. ☐ Declaration and Power of Attorney
☒ Unsigned
☐ Signed
5. ☐ Information Disclosure Statement (IDS)
☐ Copy of IDS and PTO-1449 (X pages)
☐ Copies of references cited
6. ☐ Assignment Papers
☐ Recordation Form Cover Sheet (PTO-1595)
☐ Assignment Document

02/09/01
1049 U.S. PTO

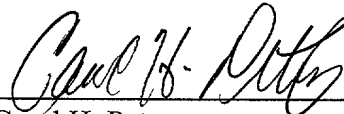
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7. Fee Calculation

CLAIMS AS FILED					
Claims	Number Filed	Basic Fee Allowance	Number Extra	Rate	Basic Fee 37 C.F.R. 1.16(a) \$710.00
Total Claims (37 C.F.R. 1.16(c))	1	- 20 =	0	\$ 18.00	0.00
Independent Claims (37 C.F.R. 1.16(b))	1	- 3 =	0	\$ 78.00	.00
Multiple Dependent Claim(s), if any (37 C.F.R. 1.16(d))	0		8	\$260.00	.00
Reduction by 50% for filing by small entity:					<u>- \$</u>
TOTAL FEE					\$ 710.00

8. ☐ Statement Claiming Small Entity Status
- ☐ Claiming Small Entity as Independent Inventor (37 C.F.R. §1.9(f) & 1.27(b)).
- ☐ Claiming Small Entity as Small Business Concern (37 C.F.R. §1.9(f) & .27(c)).
- ☐ Claiming Small Entity as Nonprofit Organization (37 C.F.R. §1.9(f) & .27(d)).
9. ☒ A check in the amount of \$710.00 is enclosed.
10. ☒ The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 50-0311, Ref. 07473-033
- ☒ Fees required under (37 C.F.R. §1.16).
- ☒ Fees required under (37 C.F.R. §1.17).
- ☒ Fees required under (37 C.F.R. §1.18).
11. ☒ Return Receipt Postcard Enclosed.

Respectfully submitted,



Carol H. Peters

Registration No. 45,010

Attorneys for Applicants

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GLOVSKY and POPEO, P.C.

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